

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Off</i>	<i>59</i>	<i>3/300</i>
O.I.P.E. CLASSIFIER	<i>Off</i>	<i>71480</i>	<i>63-19-06</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			<i>5-10-00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) Canceled A Appeal
 ÷ Restricted O Objected

Claim	Date
Final	
Original	
1	✓ ✓ ✓
2	✓ ✓ ✓
3	0 - -
4	0 ✓ ✓
5	✓ - -
6	- -
7	✓ ✓ ✓
8	✓ ✓ ✓
9	0 - -
10	0 ✓ ✓
11	✓ - -
12	1 - -
13	✓ - -
14	✓ =
15	✓ =
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If more than 150 claims or 10 actions
staple additional sheet here

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